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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY VT	SHEETS DRAWING 8	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Allowances <i>[Signature]</i> Examiner's Signature	Initials JB			

ADDRESS

30449
 SCHMEISER, OLSEN + WATTS
 3 LEAR JET LANE
 SUITE 201
 LATHAM , NY
 12110

TITLE

Digital reliability monitor having autonomic repair and notification capability

FILING FEE	RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
			<input type="checkbox"/> 1.16 Fees (Filing)
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